

2016 Premiums- Active Employees

Medical Plan Costs

Single Coverage		Monthly	Per Paycheck*
Total Single Premium		\$669.00	\$334.50
City Contribution – 90% of Single premium		(\$602.10)	(\$301.05)
Employee Contribution – 10% of Single premium		\$66.90	\$33.45
Basic, Fire, Police, LELS & Supervisory Employees	Total Cafeteria Plan Contribution	\$304.00	\$152.00
	Less employee responsibility	(\$66.90)	(\$33.45)
	Remaining Cafeteria Plan Contribution	\$237.10	\$118.55
Confidential Employees	Total Cafeteria Plan Contribution	\$320.00	\$160.00
	Less employee responsibility	(\$66.90)	(\$33.45)
	Remaining Cafeteria Plan Contribution	\$253.10	\$126.55
Family Coverage		Monthly	Per Paycheck*
Total Family Premium		\$1,646.00	\$823.00
City Contribution – 80% of Family premium		(\$1,316.80)	(\$658.40)
Employee Contribution – 20% of Family premium		\$329.20	\$164.60
Basic, Fire, Police, LELS & Supervisory Employees	Employee Responsibility	\$329.20	\$164.60
	Less Cafeteria Plan Contribution	(\$229.00)	(\$114.50)
	Remaining Employee Responsibility	\$100.20	\$50.10
Confidential Employees	Employee Responsibility	\$329.20	\$164.60
	Less Cafeteria Plan Contribution	(\$245.00)	(\$122.50)
	Remaining Employee Responsibility	\$84.20	\$42.10
Waiver of Health Insurance Coverage**		Monthly	Per Paycheck*
Fire, LELS & Supervisory Employees	Cafeteria Plan Contribution	\$304.00	\$152.00
Confidential Employees	Cafeteria Plan Contribution	\$320.00	\$160.00

*Per-Paycheck amounts for health premiums and cafeteria plan contributions are calculated using 24 pay periods; in months that contain a third paycheck, no premium deductions will be held from the third employee paycheck.

**Employees waiving coverage must make that election annually and provide proof of other coverage.

Dental Plan Costs

Plan	Low Option (\$1,000 Annual Benefit)			High Option (\$2,000 Annual Benefit)		
	Monthly Premium	City Contribution	Employee Contribution	Monthly Premium	City Contribution	Employee Contribution
Single	\$31.00	\$31.00	\$0.00	\$63.00	\$31.00	\$32.00
Single + 1	\$62.00	\$31.00	\$31.00	\$119.00	\$31.00	\$88.00
Family	\$102.00	\$31.00	\$71.00	\$211.00	\$31.00	\$180.00